



Atty. Dkt. No. 025572-0102

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Golshan, Khosrow

Title: METHOD AND
APPARATUS FOR
OPTICAL PROCESSING

Appl. No.: 09/630,883

Appl. Filing Date: 08/02/2000

Examiner: Chang, Audrey Y.

Art Unit: 2872

Confirmation No.: 7954

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
EV 962267516 US (Express Mail Label Number)	February 23, 2007 (Date of Deposit)
Deborah A. Kocorowski (Printed Name)	
 (Signature)	

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified patent application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. § 141, or the commencement of a civil action under 35 U.S.C. § 145 or § 146 (unless the appeal or civil action is terminated).

02/27/2007 LWONDIM1 00000088 09630883

01 FC:1801 790.00 OP

02/27/2007 LWONDIM1 00000088 09630883

02 FC:1253 1020.00 OP

MILW_2225535

1. Submission required under 37 C.F.R. § 1.114: (check items that apply)

a. Previously submitted:

- ☐ Please enter and consider the amendment and/or reply previously filed on ____.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ____ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply previously filed on ____.
- ☐ Other ____.

b. Enclosed are:

- ☒ Amendment and Reply Under 37 C.F.R. § 1.116 (15 pages).
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of ____ listed reference(s).
- ☐ Other .

Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	40	- 46	= 0	x \$50.00	= \$0.00
Independents	5	- 5	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☒ The Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$120.00	0	\$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$450.00		\$0.00
<input checked="" type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00		\$1,020.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,590.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,160.00		\$0.00
EXTENSION FEE SUBTOTAL:				\$1,020.00
EXTENSION FEE ALREADY PAID: -				\$0.00
EXTENSION FEE TOTAL				\$1,020.00
CLAIMS AND EXTENSION FEE TOTAL:				\$1,810.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):			\$0.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:				\$1,810.00

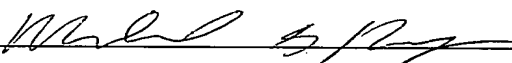
A credit card payment form in the amount of \$1,810.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 2/23/07

By 

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